2022/2023 Executive Director S57 Performance Scorecard (Mid-Year Amendment)
Executive Director: Community Services & Health
1 July 2022 - 30 June 2023

No.		Objective	Key Performance Indicator	Definition	Annual Target 2022/2023	Q1 30 Sep 2022 Target	Q 2 31 Dec 2022 Target	Q 3 31 Mar 2023 Target	Q4 30 Jun 2023 Target	WEIGHTING	Contact Department
	MUNICIPAL INSTITUTIONAL DEVELOPMENT AND TRANSFORMATION									**20%**	
	MUNICIPAL FINANCIAL VIABILITY									**10%**	
	SERVICE DELIVERY/GOOD GOVERNANCE									**58%**	
	SPECIAL PROJECTS									**12%**	
										100%	
	MUNICIPAL INSTITUTIONAL DEVELOPMENT AND TRANSFORMATION									**20%**	
1	1	Transversal Management	Increase in PPM maturity level based on the PPM Operating Model (%)	The original PPM maturity level is based on the PPM Operating Model maturity assessment that was tabled at EMT during June 2018. The maturity assessment will reflect the maturity at Portfolio, Programme and Project level and will occur on an annual basis in order to assess the increase in the maturity level. The maturity level is measured on a scale of 1 - 5. The maturity levels: * Level 1 – Initial Process: No standard process or tracking system – informal process * Level 2 – Repeatable Process: Minimum standards for processes and procedures * Level 3 – Defined Process: Defined Process which allow for flexibility * Level 4 – Managed Process: Obtain and retain specific measurements and quality requirements * Level 5 – Optimised Process: Continuous process improvement and proactive technology and problem management for future improvements The EDs for Finance and Corporate Services will be measured on a City-wide maturity level. All other EDs will be measured per the individual directorate. <u>Performance rating</u>: Fully effective = achieve increase of 0.1 - 0.2 Significantly above expectation = range between 0.21 - 0.5 Outstanding performance = 0.51 and above	Actual achieved of prior year +increase 0.1 - per directorate individual achievement	AT	AT	AT	Actual achieved of prior year +increase 0.1 - per directorate individual achievement	2%	Department: C3PM Source document: PPM assessment Contact person: Ben Peters 021 400 9206

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	MUNICIPAL FINANCIAL VIABILITY									**10%**	
	SERVICE DELIVERY/GOOD GOVERNANCE									**58%**	
	SPECIAL PROJECTS									**12%**	
										100%	
2	2	16. A Capable and Collaborative City Government	Expansions and Amendments of repeatable contracts (%)	Measures the percentage of expansions and amendments on repeatable contracts. This indicator will only measure instances where there was more than one expansion and amendment on the same contract. Expansions are defined as an extension of less than 6 months and amendments are defined as extension beyond 6 months. Source: contract register. Measurement will commence only when expansion or amendment was concluded and only applies to repeatable contracts. Expansions are approved by BAC. Amendments are approved by Mayco and BAC. Total number of repeatable contracts expanded and/or amended ÷ Total number of repeatable contracts. Measured cumulatively. Performance rating: Not fully effective= 2.1% and above Fully effective = 2% Significant performance = range 0,1% - 1.9% Outstanding =0%	2%	N/A	2%	N/A	2%	2%	Department: OPM - Contract Management Source document: CMS (Contract Management System) report to EMT Contract register Contact person: Maureen Whare 021 400 9206
3	3	16. A Capable and Collaborative City Government	Reduction in the number of SCM deviations (%)	**The objective is to achieve a 20% reduction on SCM deviations.** The indicator only applies to Supply Chain Management (SCM) deviations above R200 000 (inclusive of VAT). Sole/single service provider deviations and deviations relating to emergencies will be excluded from the measurement as per section 36 of SCM regulations. The indicator will measure the percentage year on year reduction from the previous year's number of SCM deviations. Formula: (No. of SCM deviations for current year – No of SCM deviations for prior year)/ Number of SCM deviations for prior year X 100" <u>Performance rating:</u> <u>U</u>nacceptable performance= any positive increase in deviations. Not fully effective= decrease deviations between 1% and 19%. Fully effective= decrease deviations by 20%. Significant performance = decrease deviations between 21% and 99%. Outstanding performance = 0 deviations	20%	AT	AT	AT	20%	3%	Department: SCM Source document: Evidence: Formula: Number of SCM deviations reduced by the target percentage % year on year for the department/ directorate. Contact person: Abu Bakr Moerat SCM: Head of Supplier Management and Administration 021 400 3007

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	MUNICIPAL FINANCIAL VIABILITY								10%	
	SERVICE DELIVERY/GOOD GOVERNANCE								58%	
	SPECIAL PROJECTS								12%	
									100%	
4 4	16. A Capable and Collaborative City Government	Average reduction in the number and value of irregular expenditure identified for the Directorate (%) (year-on-year)	**The objective is to achieve a 50% reduction on irregular expenditure.** The objective is to achieve a 50% reduction on irregular expenditure. The indicator will measure the average percentage reduction in the number and value of irregular expenditure i.e.. contravention of legislation as defined in the irregular expenditure definition. Irregular expenditure is defined as expenditure that is in contravention of, or not in accordance with, a requirement of the Local Government: Municipal Finance Management Act 56 of 2003, the Local Government: Municipal Systems Act 32 of 2000, the Remuneration of Public Office Bearers Act 20 of 1998, or the municipality's supply chain management (SCM) policy. Indicator will measure Irregular expenditure that arose only in the time of employment of the ED. Irregular expenditure will be measured based on the financial year in which it is disclosed. Irregular expenditure is based on self-disclosure or detected by an assurance provider (including AGSA) for the current financial year and the year preceding the current financial year where the ED was accountable for the directorate. Formula: (Non-compliance Instances for the current year – Non-compliance instances for prior year)/ Non-compliance instance for prior year X 100" + (Irregular expenditure amount for current year – Irregular expenditure amount for prior year)/ Irregular expenditure amount for prior year X 100" / 2 Refer to table below for calculation: <u>Performance rating</u> Not fully effective= a reduction of above 0% and less than 50% Fully effective= a reduction between 50%-99% Outstanding = 100% reduction or 0 instances	50%	AT	AT	AT	50%	3%	Department: City Manager Office Source document: Irregular Register and the AG's findings **in the quarter that it is available**. Contact person: Gayle Postings 021 400 1268

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	MUNICIPAL FINANCIAL VIABILITY									**10%**	
	SERVICE DELIVERY/GOOD GOVERNANCE									**58%**	
	SPECIAL PROJECTS									**12%**	
										100%	
5	5	16. A Capable and Collaborative City Government	External **(Auditor General)** audit actions completed as per audit action plan (%)	This indicator measures how many actions was completed in the financial cycle within in the unique deadline set, as per the audit action plan. The Audit Action Plan sets out the total number audit actions required to address the internal control deficiencies as identified by the Auditor-General in their management report. Completed would mean that the actions as stipulated in the audit action plan has been executed by the relevant ED and/or Director. Should there be no actions required for an Executive Director and/or Director the indicator will not be applicable. Performance rating: Outstanding =100% No scores for fully effective and significant.	100%	100%	100%	100%	100%	2%	Department: Investor Relations Source document: Completed Audit Action plan Contact person: Lynn Fortune:021 400 5987
6	6	16. A Capable and Collaborative City Government	Final Council decisions implemented within timeframes (%)	The indicator excludes all council decisions for noting. Decisions taken by where there is no budget to implement actions or outside of the control of the ED. These exclusions must be supported by valid evidence. These decisions must be reflected on each quarterly report for the City Manager and/or panel's awareness. All final Council decisions allocated to the ED with implementation date for the quarter must be implemented and reported on for the quarter to achieve the target. Implementation that runs over a period longer than a financial year will be measured according to milestones identified for implementation within the current financial year. Each ED must ensure that a date is allocated of when action will be completed and implemented. This must be captured in the CDIT system by the relevant implementer. If no timeframe was allocated the timeframe is deemed to be one month for implementation. Implementation is the date of completion of the actions or achievement of councils request or expectation. Weighting must be reallocated where there were **no council decisions** for the year. Performance rating: Outstanding performance= 100% Score of 5 and scoring will apply downwards where decisions were not implemented. Significant performance= range between 99% - 80% of ALL decisions Fully effective= range between 79% -70% of ALL decisions Below 70% not effective	100%	100%	100%	100%	100%	1%	Each ED is responsible for implementation, evidence and updates to the tracking system. Source document: SharePoint tracking Tracking System contact person: - Rehana Razack (021 400 1246) Weighting must be reallocated where there were no council decisions for the year.

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MUNICIPAL FINANCIAL VIABILITY									**10%**	
SERVICE DELIVERY/GOOD GOVERNANCE									**58%**	
SPECIAL PROJECTS									**12%**	
									100%	
7 7	16. A Capable and Collaborative City Government	Final MAYCO decisions implemented within timeframes (%)	The indicator excludes all mayco decisions for noting. Decisions taken by mayco where there is no budget to implement actions or outside of the control of the ED. These exclusions must be supported by valid evidence. These decisions must be reflected on each quarterly report for the City Manager and/or panel's awareness. All final Mayco decisions allocated to the ED with implementation date for the quarter must be implemented and reported on for the quarter to achieve the target. Implementation that runs over a period longer than a financial year will be measured according to milestones identified for implementation within the current financial year. Each ED must ensure that a date is allocated of when action will be completed and implemented. This must be captured in the CDIT system by the relevant implementer. If no timeframe was allocated the timeframe is deemed to be one month for implementation. Implementation is the date of completion of the actions or of achievement of mayco's request or expectation. Weighting must be reallocated where there were **no mayco decisions** for the year**.** <u>Performance rating:</u> Outstanding performance= 100% Score of 5 and scoring will apply downwards where decisions were not implemented. Significant performance= range between 99% - 80% of ALL decisions Fully effective= range between 79% -70% of ALL decisions Below 70% not effective+E16	100%	100%	100%	100%	100%	1%	Each ED is responsible for implementation, evidence and updates to the tracking system. Source document: SharePoint tracking Tracking System contact person: - Rehana Razack (021 400 1246) Weighting must be reallocated where there were no mayco decisions for the year.

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	MUNICIPAL FINANCIAL VIABILITY								**10%**	
	SERVICE DELIVERY/GOOD GOVERNANCE								**58%**	
	SPECIAL PROJECTS								**12%**	
									100%	
8 8	16. A Capable and Collaborative City Government	16.J Budget spent on implementation of Workplace Skills Plan (%)	Measures the percentage of budget spent on the Workplace Skills Plan .The Workplace Skills Plan outlines the planned education, training and development interventions for the organisation. Its purpose is to formally plan and allocate budget for appropriate training interventions that will address the needs arising out of local government's skills sector plan, the IDP, the individual departmental staffing strategies, individual employees' personal development plans and the employment equity plan. Proxy measure for NKPI per MSA Regulation 10(f). Formula: % spent on the implementation of the WSP measured against the training budget. (A/B)*100 A: Actual spend per quarter on training budget B: Planned spend on training Budget for the year Performance rating: Fully effective = 90% Significant performance=between range of 91% to 97%. Outstanding performance=98% and above	90%	10%	30%	60%	90%	1%	Source documents: WSP report per quarter Contact person: Nonzuzo Ntubane 021 400 4056
9 9	16. A Capable and Collaborative City Government	Internal independent assurance provider's recommendations implemented (%)	It is the monitoring and reporting of the implementation (expressed as a percentage) of corrective actions to address internal independent assurance providers' recommendations, issued within the directorate of the responsible Executive Director. The internal independent assurance providers included in this KPI are **Internal Audit, Ombudsman, Integrated Risk Management, Ethics and Forensics functions.** Each internal independent assurance provider as mentioned above has their own unique input to this KPI. This KPI will be "not applicable" to management when there are no recommendations, thus only those that could provide inputs will be included in the calculation. Fully effective = 85% Significant performance = between range of 86% to 94%. Outstanding performance = 95% and above	85%	85%	85%	85%	85%	2%	Department: Combined Assurance and Governance Source documents: refer to definition Contact person: Zotshokazi Kakaza 021 400 6310

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										100%	
10	10	16. A Capable and Collaborative City Government	16.A Community satisfaction city-wide survey(score 1-5)	Measures the score on the Community satisfaction City-wide survey. A statistically valid, scientifically defensible score from the annual survey of residents' perceptions of the overall performance of the City's. The measure is given against a non-symmetrical Likert scale, where 1 is poor, 2 is fair, 3 is good, 4 is very good, and 5 is excellent. The objective is to improve the current customer satisfaction level. <u>Performance rating</u>: Fully effective = 2.8 Significant performance=between range of 2.9 - 3.1 Outstanding performance= 3.2 and above	2.8	Annual Target	Annual Target	Annual Target	2.8	2%	Department: Organisational Effectiveness and Innovation Source document: Community Satisfaction survey score Contact person: Brigette Morris 021 400 3812
11	11	16. A Capable and Collaborative City Government	Increase in City Pulse score	The City Pulse survey measures the organisational culture and aims to improve employee experience at the City. <u>Performance rating</u>: Fully effective = achieve an increase of 0.0 and 0.1 Significantly above expectation = increase of overall score by between 0.11 and 0.3 Outstanding performance = increase greater than 0.31	3.9	Annual Target	Annual Target	Annual Target	3.9	1%	Department: OEI Source document: City Pulse 2021 Results and City Pulse 2019 results with the 3 questions identified Contact person: Monica Pregnolato 0214009221

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	SERVICE DELIVERY/GOOD GOVERNANCE									58%	
	SPECIAL PROJECTS									12%	
										100%	
	MUNICIPAL FINANCIAL VIABILITY									10%	
12	1	16. A Capable and Collaborative City Government	16.D Spend of capital budget (%) (NKPI)	Measures the extent to which capital expenditure has been spent based on the original budget during the financial year. Capital expenditure is all costs incurred by the municipality to acquire, upgrade, and renew physical assets such as property, plants, buildings, technology, or equipment. Proxy measure for NKPI per MSA Regulation 10(c). Proxy measure for C88 FM1.11 Performance rating: Fully effective =90% Significant performance= range between 91% to 94%. Outstanding performance=95% and above	90%	15.2%	29.4%	48.9%	90%	6%	Directorate Finance Manager
13	2	16. A Capable and Collaborative City Government	Operating budget spent (%)	This indicator measures the total actual expenditure to date as a percentage of the total budget including secondary expenditure. Performance rating: Fully effective =95% Significant performance= range between 96% to 98%. Outstanding performance=99% and above	95%	22.1%	47.4%	71.0%	95%	4%	Directorate Finance Manager

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	SERVICE DELIVERY/GOOD GOVERNANCE									**58%**	
14	1	OBJ 11: Quality and safe parks and recreation facilities supported by community partnerships. CSC & Mayoral Request	11. A Recreation & Parks open spaces mowed according to Annual Mowing Plan (%)	This indicator measures the percentage implementation of the R&P Dept. public open space mowing during the year, compared to the Annual Mowing Plan. The minimum mowing cycles and ability to meet the 80% target are directly linked to the budget available for the project. The measurement is frequency of actual mowing vs planned mowing. Performance rating: Unacceptable performance = below 75% Not fully effective = 75-79% Fully effective = 80% Significant performance = 81-85% Outstanding performance = more than 85%	80%	A/T	A/T	A/T	80%	6%	Director: Recreation & Parks
15	2	OBJ 9: Healthy and sustainable environment	9. C Severe/Moderate dehydration in children under the age of five presenting at City health facilities with diarrhoea (%)	This indicator measures the proportion of children under 5 years with diarrhea presenting to City Health facilities, that have severe or moderate dehydration. Numerator: number of children <5 with diarrhoea presenting to city health facilities, with severe or moderate dehydration Denominator: total number of children <5 with diarrhea presenting to city health facilities Performance rating: Unacceptable performance = more than 5.4% Not fully effective = 5.4-5.3% Fully effective = <5.2% Significant performance = 5-5.1% Outstanding performance = below 5%	<5.2%	A/T	A/T	A/T	<5.2%	6%	Director: City Health
16	3	OBJ 11: Quality and safe parks and recreation facilities supported by community partnerships C88	Library visits per library (average number)	Utilisation rate is indicative of the supply and demand for community facilities such as libraries. It can be used to inform planning and performance of facilities. The number of visits is a direct measure of utilisation, whether to access books or to use the space for one of its other community functions. Performance rating: Unacceptable performance = below 63 000 Not fully effective = 63 000 - 64 999 Fully effective = 65 000 average Significant performance = 65 001 - 66 000 Outstanding performance = more than 66 000	65 000	A/T	A/T	A/T	65 000	6%	Director: LIS

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	SPECIAL PROJECTS									**12%**	
										100%	
17	4	OBJ 16: A Capable and Collaborative City Government	Eligible ECD registration applications processed on the ECD Modernization tool (%)	The indictor measures the percentage of unregistered ECD Centres with NPO registration applications initiated using the City's online ECD Modernisation Tool. The ECD Modernisation Tool enables the various CCT departments (Spatial Planning, Fire and Safety, Environmental Health and SDECD) responsible for City ECD compliance matters to work collectively in order to fast track processes leading to the ECD Centres' registration with the Provincial Department of Social Development. Performance rating: Unacceptable performance = 0%- 49% Not fully effective = 50%- 99% Fully effective = 100% No scores for significant and outstanding performance.	100%	100%	100%	100%	100%	6%	Director: SD&ECD
18	5	OBJ 9: Healthy and sustainable environment	Health hazards identified escalated to internal line departments (%)	Number of health hazards identified by Health during weekly assessments of informal settlements. (source document – weekly informal settlement assessment sheet.) Number of service requests directed to applicable line departments responsible for addressing health hazard. (C3 reference number) Performance rating: Unacceptable performance = below 90% Not fully effective = 90-94% Fully effective = 95% Significant performance = 96-99% Outstanding performance = 100%	95%	95%	95%	95%	95%	6%	Director: City Health
19	6	OBJ 9: Healthy and sustainable environment	Days with GOOD air quality (number)	The indicator provides a measure of the number of days in the municipality where air quality at representative monitoring sites remained at "good" levels or better in terms of air quality standards. “Good” air quality – refers to when the monitoring sites report ambient air levels of NO2, SO, O3, PM10, PM2.5 and CO monitoring within a given day that are in compliance with ambient standards (complete 24 hour period). This measures the number of days within the calendar year in which selected sites report 'good' air quality, recognising the different reporting intervals for the different measures and the fact that not all sites will sample for all pollutants. Performance rating: Unacceptable performance = below 240 Not fully effective = 240 - 249 Fully effective = 250 Significant performance = 251 - 259 Outstanding performance = above 260	260	81	162	243	260	6%	Director: City Health

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	MUNICIPAL FINANCIAL VIABILITY									**10%**	
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	SPECIAL PROJECTS									**12%**	
										100%	
20	7	OBJ 15: A more spatially intergrated and inclusive city	Awareness raising initiatives to support the re-integration of Homeless People into communities (number)	Measures the number of awareness raising campaigns City wide to reduce the prevalence of persons migrating and living on the street. The initiatives will raise awareness around the Inhumane conditions of people living on the street through the enabling of communities provision of giving indiscriminant handouts, giving with dignity, however, not limited to: 1. Print media Campaign (1per quarter) 2. Social Media Campaign (Annually - 2nd quarter) 3. Business Sensitisation (Annually - 2nd quarter) 4. Lamp posts (2 -2nd and 4th quarter) 5. Public awareness sessions <u>Performance rating</u>: Unacceptable performance = below 85 Not fully effective = 85-89 Fully effective = 90 Significant performance = 91-95 Outstanding performance = more than 95	90	22	44	66	90	5%	Director: SD&ECD
21	8	OBJ 9: Healthy and sustainable environment	Live well challenges implemented (number)	A Live Well Challenge initiative consists of an 8 week programme that provides the community with Health education and exercise sessions conducted within a specific area as a collaborative effort of the departments of the Community Services & Health Directorate <u>Performance rating</u>: Unacceptable performance = below 3 Not fully effective = 3 Fully effective = 4 Significant performance = 5 Outstanding performance = more than 5	4	0	0	0	4	5%	Director: City Health

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										100%	
22	9	OBJ 11: Quality and safe parks and recreation facilities supported by community partnerships	Milestones reached in line with the 2023 Netball facility upgrade and maintenance programme (number)	This indicator monitors the Recreation and Parks Department's role in preparation towards the development and implementation of a facility upgrade and maintenance programme in support of the broader 2023 City Netball World Cup. Develop 1)Conduct and finalise facility audit (Q1) 2)Engage Netball Cape Town (Q1) 3) Identify facilities for targeted maintenance and programme of works (Q2) Implement 4) Develop and prioritise a facility R&M plan (Q3) 5) Initiate programme implementation by Area PMOs (Q4) 6) Programme implementation plan targets for 2022/23 financial year approved by Director (Q4) Performance rating: Unacceptable performance = below 5 Not fully effective = 5 Fully effective = 6 Significant performance = 7 Outstanding performance = more than 7	6	2	3	4	6	6%	Director: Recreation & Parks
23	10	OBJ 16: A Capable and Collaborative City Government	IT initiatives implemented that improve the ease of doing business (number)	Measures the number of Community Services and Health IT Initiative projects implemented that improve the ease of doing business. Community Services and Health IT Initiative project is a multi-year project in which the Corporate IT department plays a vital role. Performance rating: Unacceptable performance = below 3 Not fully effective = 3 Fully effective = 4 Significant performance = 5 Outstanding performance = more than 5	4	A/T	A/T	A/T	4	6%	Manager: PD&PMO

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	SPECIAL PROJECTS									**12%**	
										100%	
	SPECIAL PROJECTS (RELATING TO DIRECTORATE FUNCTIONAL AREA)									**12%**	
24	1	COVID-19 & Mayoral Request	*COVID-19 recovery plan* : Investigate sites for the establishment of additional safe spaces and finalize concept plans for agreed-to sites	This indicator will measure the progress of the investigation of sites for the establishment of additional safe spaces, and the finalization of concept plans for agree-to sites. It requires a number of processes, like applications for property reservations, land use, zoning, EIA, etc. Performance rating: Unacceptable performance = Not Finalized Fully effective = Concept Plans finalized	Finalize Concept Plans for agreed-to sites	Conclude investigation into suitable land, buildings and other existing properties/ sites identified for development of additional Safe Spaces	Obtain financial commitment and submit report to PC to solicit permission to proceed, based on suitable land, buildings and other existing properties/sites	Submit applications for property reservation, land use, zoning, EIA, etc	Finalize Concept Plans for agreed-to sites	6%	Director: Social Development & Early Childhood Development
25	2	Less Formal Township Establishment Act (LFTEA) areas	*Less Formal Township Establishment Act (LFTEA) areas* : Transversal informal settlement initiatives (number)	This is a transversal indicator for the directorate. These transversal informal settlement initiatives focus on integration and alignment with other Community Services and Health departments. Once an initiative is completed, a report should be drafted by the responsible line department official who was involved in the intervention. This report describes the activities each department was responsible for and the outcomes. The desired outcome is extended to community impact and benefit. Performance rating: Unacceptable performance = below 3 initiatives Not fully effective = 3 initiatives Fully effective = 4 initiatives Significant performance = 5 initiatives Outstanding performance = more than 5 initiatives	4	AT	AT	AT	4	3%	Director: Recreation & Parks

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1 July 2022 - 30 June 2023

No.		Objective	Key Performance Indicator	Definition	Annual Target 2022/2023	Q1 30 Sep 2022 Target	Q 2 31 Dec 2022 Target	Q 3 31 Mar 2023 Target	Q4 30 Jun 2023 Target	WEIGHTING	Contact Department
	MUNICIPAL INSTITUTIONAL DEVELOPMENT AND TRANSFORMATION									**20%**	
	MUNICIPAL FINANCIAL VIABILITY									**10%**	
	SERVICE DELIVERY/GOOD GOVERNANCE									**58%**	
	SPECIAL PROJECTS									**12%**	
										100%	
26	3	Unlawful Land Occupation (ULO)	*Unlawful Land Occupation (ULO)* : Identified Recreation & Parks sites where legal action for interdicts/eviction has been **initiated** (number)	This indicator measures the number of initiations by Recreation and Parks, for legal action (interdicts/evictions) to proceed. It is a count of the number of "applications" handed over to Legal Services for response. Performance rating: Unacceptable performance = below 10 Not fully effective = 10-11 Fully effective = 12 Significant performance = 13-14 Outstanding performance = more than 14	12	3	6	9	12	2%	Director: Recreation & Parks
27	4	CM request	Staff housing population verified, per directorate (%) (R&P)	Measures the percentage of Staff Housing population verified by confirming occupancy, operational need, and conditions as per the approved allocation list, as compiled by the Directorate coordinators to ensure validity, accuracy and completeness by conducting annual site visits to confirm staff occupancy against the approved list. Includes operational and non-operational. The approved list must include the following: • Property occupancy – staff member confirmed, including staff number. • Need for staff member to occupy property i.e. operational need. • Lease number and tenure. • Rental value. • Fringe benefit registration, confirmed with Payroll. • Annual site visit records (pictures) to confirm occupancy and property conditions. • Escalation intervention requests, where property conditions place tenants at risk. Performance rating: Fully effective = 50%	50%	30%	50%	50%	50%	1%	Director: Recreation & Parks

2022/2023 Executive Director S57 Performance Scorecard (Mid-Year Amendment)
Executive Director: Community Services & Health
1 July 2022 - 30 June 2023

No.	Objective	Key Performance Indicator	Definition	Annual Target 2022/2023	Q1 30 Sep 2022 Target	Q 2 31 Dec 2022 Target	Q 3 31 Mar 2023 Target	Q4 30 Jun 2023 Target	WEIGHTING	Contact Department
MUNICIPAL INSTITUTIONAL DEVELOPMENT AND TRANSFORMATION									**20%**	
MUNICIPAL FINANCIAL VIABILITY									**10%**	
SERVICE DELIVERY/GOOD GOVERNANCE									**58%**	
SPECIAL PROJECTS									**12%**	
									100%	
28	5	Percentage completion of MFMA Competency by Executive Directors	The indicator measures the adherence to the MFMA. Section 16 of the MFMA requires Executive Directors (EDs) to meet the minimum competency levels. The attainment of competency levels must be obtained within prescribed timeframes and must be included in performance agreements. EDs have 18 months to complete, which commences on date that contract was signed. Within the 18 month period the 100% target will represent the modules completed for the year. Amendment to improve accuracy of indicator and provide clarity in terms of what should be excluded from calculation. Performance rating: Fully effective = 100% *(100% = 15 lectures (modules) attended; and 15 examinations written.)*	100%	N/A	N/A	N/A	100%	0%	ED: Community Services & Health

Zukiswa Mandlana

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Date: 2023.05.03 19:54:23 +02'00'

Executive Director:
Community Services & Health
Zukiswa Mandlana

Digitally signed by Lungelo Mbandazayo
Date: 2023.05.24 08:11:24 +02'00'

City Manager:
Lungelo Mbandazayo